

State of South Dakota

Candidate's or Committee's Report of Receipts and Expenditures

Candidates and candidate committees: File in the office where you filed your nominating petition. PACs, political party, ballot question and other committees: File in the office where you filed your nominating petition. File with Elections Department, Secretary of State's Office, 500 E Capitol Ave., Pierre, SD 57501-5070	7
See pages 9 & 10 of the Guideline Book for specific instructions on completing this report.	E
Name of Candidate or Committee Maxine Broken Nose	
Complete Mailing Address BOXN55 PineRidge 15, D. 57770	
Name of Person Making Report Wade Broken Nose Daytime Phone Number (605)455	763
If you are a candidate, what office are you seeking? District 27 House Representa	+nu
If you are a ballot question committee, indicate which measure(s) the committee was involved with during t reporting period and whether the measure was supported or opposed.	he
Type of Report (See pages 4 & 5 of Guideline Book) Termination Report	
For Reporting Period Ending (See pages 4 & 5 of Guideline Book) Election 2006 Cycl	<u>e</u> _
The following verification must be completed before submitting report.	
VERIFICATION OF PERSON MAKING REPORT	ه درومه فرود .
I <u>Na vine</u> By to Ken No Se (print name legibly), certify that I have examine this report and to the best of my knowledge and belief it is true, correct and complete.	ed :
Date: 12-29-06 Candidate Signature or Signature of Committee Treasurer or Chairpers of day of	
Revised July 2001 Filed this analy Of STATE SECRETARY OF STATE	

Name of Candidate or Committee Maxine Broken Dose (Republican)	Districtor
Name of Candidate or Committee Muxine Broken Wose (Republican) For the reporting period ending June 18t to Nov Olo Campaign Cylle	Candidate House of Rep

Schedule A – Direct Contributions

This schedule is used for reporting all direct contributions. You must keep a record of all contributors, but for this report you may combine all contributions of \$100 or less from individuals and the same from political parties and enter these sums as unitemized contributions on their respective lines below and on the next page. Any contribution of more than \$100 or aggregate during a calendar year from an individual or political party and all contributions from PAC's must be entered as a separate item (itemized) giving the amount, name, address and place of employment (if applicable) of the contributor. Each type of contributor has their own section for itemization. This schedule may be duplicated if you need more space, or you may attach additional sheets of paper.

Itemized Contributions from Inc	lividuale			
THEREASER CONTRIBUTIONS IN DISTRICT		Place of Employment		est in the second second
Name	Residence Address	(Name of Employer)		
Wade Broken Nose	Houset 6 North Ridge	(Name of Employer) Place Wounded Knue Dist. Sch 5 05775 (Name v Son, S.O. 577	\$ \$	3250
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	<u>. L </u>		\$	325.00

Appendix B Name of Candidate or Committee Maxine Broken Nose (Republican) District For the reporting period ending November 2006 - Election Cycle
June 1st, 2006 Schedule A – Direct Contributions (continued) **Unitemized Contributions from Political Parties: Itemized Contributions from Political Parties Party Name** Pierre, S.D. 57501 South Dakota Republican Party South Dakota Republican Party Pierre, S. D. 57501 South Dakota Federation of Republican Women P.O. Box 59 Valley Springs, S.D. 57068 Total of Itemized Contributions from Political Parties: Itemized Contributions from Political Action Committees (PAC's) - All contributions from PAC's must be itemized. **PAC Name** Address

Total of Itemized Contributions from Political Action Committees:

Total of All Direct Contributions (Sum of all lines with an *)

Name of Candidate or Committee:	Maxine Broken Nosel Renublican) Died	Appendix E
For the reporting period ending:	Navine Broken Nose (Republican) Dist Cand DV 10-06 From June 15+, 2006 House	lidate or of Rep
Schedule List on this schedule fund-raising events held to	e B - Fund-Raising Events Proceeds oraise money for the candidate and the net proceeds derived ibution results in their aggregate being more than \$100 in the	from each event. If a calendar year, those
Type or Name of Event	1	Net Proceeds
		And would be about the control beautiful to th
Total:		
e Otal.		
	edule C - In Kind Contributions ervices and the estimated fair market value. If the value exceptoyment must be reported.	eeds \$100, the name of the
Nature of Non-Cash Contribution	Name, Residence Address & Place of Employment	Estimated Value
Il watding or Observing Nowater + Part +Kyli 50	Place of Employment Wade Broken 100 32 House #6 Northberke Box 455 PineRulge, S.D.S	720 425 00
Pollobserving - PineRidge, S.D.	Maxing Broken Nose House # 4 North Ridge Box 455 Pine Ridge S.D.577	167.00
		• `
Total:	<u> </u>	597.8
	Schedule D - Other Income at earned or other income which is not a direct contribution.	
Source of Income		Amount
		4 (177)
Total:		-0-

Name of Candidate or Committee: Maxime Broken Nose (Republican) District 27 Candidate
For the reporting period ending: 1st, 06 to November & Campaign Cycle

Schedule E - Expenditures

• This schedule is to report all expenditures relating to a candidate's campaign. Line items have been provided for reporting common expenses. All other expenses should be listed. All contributions to candidates and committees must be listed individually.

Expenses		Contributions Made to Candidates and Committees	
ltem	Amount	Name of Candidate or Committee	Amount
Advertising			
Consulting			
Postage			
Printing	_		
Rent Vehicles	#14500		
Salaries	\$812.00		
Telephone		*.	
Travel Das Receipte	\$ 237.09		
Utilities			
	List other expense		
	amounts below		
Vaking Ollupaions	\$ 440.53		
ica for Werker's	0) 54.46		
DOW(A) DIONX HIPPO	54.		
bom@Sioux Files. ampaign Trail@	J		
Panwan [
	4 5		
Merrill Cakes & Ramp	aign #25.00		
Merrill Cakes & Ramp Wight 11-07-06			
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levrill Cake	\$25.00		
Vight 11-07-06			
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	<u> </u>		
Total Expenditures:			2088.83

Name of Candidate or Committee: Maxine Broken Nose (Republican) District 27 Candidate	11-
4/ 02	- totale
Name of Candidate or Committee: Maxine Broken Nose (Republican) District 27 Candidate For the reporting period ending: Campaign 06 Cycle June 15t, Op to Nov 06	WW wo - o-d

Schedule F - Debts and Obligations

This schedule is to report all of the candidate's campaign obligations which are unpaid at the end of the reporting period. If a service has been contracted but not billed, estimate the amount of the obligation.

Owed to:	Purpose:	Amount
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Total Obligations:		-0-

Name of Candidate or Committee: Monine Bro Multe	e(Republican) District 24- Condidate Nouse of Representative
For the reporting period ending: Campaign Cy	le 2006 June 15 06 to Nov 06

Summary Page

This summary sheet will give a brief outline of all campaign finance activity during this reporting period. Please transfer all totals from the schedules previously completed.

arom the senedates previously completed.				
1.	Amount on hand, if any, at the beginning of the reporting period:		s <u>-0-</u>	
2.	Receipts			
	Schedule A - Direct Contributions	\$ 17.25,00		
	Schedule B - Fund-Raising Events	s <u> </u>		
	Schedule C - In Kind Contributions	\$ 592,00		
	Schedule D - Other Income	s <u> </u>		
	Total of all Receipts	s <u>2317</u>		
3.	Total Monetary Receipts (A+B+D)		\$ 1725.00	
4.	Candidate's Personal Contribution to Own	n Campaign	\$ 350,00	
5.	Monetary Loans to Candidate or Commit	tee During Reporting Period	sO-	
6.	Monetary Loans Repaid During Reportin	g Period	\$ <u>-0-</u>	
7.	Expenditures - Schedule E		\$ 2088.83	
8.	Unpaid Obligations - Schedule F	s <u>-0-</u>		
9.	Amount on hand at the close of this report. This should equal lines $(1+3+4+5) - (6+3)$		\$ <u>-0-</u>	

